

APPLICATION DATA SHEET

Application Information

Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?:: No
Sequence Submission?:: NO
Computer Readable Form (CRF)?:: No
Title:: Suturing Instruments and Methods of Use
Attorney Docket Number:: BSC-093C8
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 18A
Total Drawing Sheets:: 14
Small Entity?:: NO
Licensed US Govt. Agency:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Unknown
Given Name:: Norman
Middle Name:: S.
Family Name:: Gordon
City of Residence:: Irvine
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 21 Snowapple
City of Mailing Address:: Irvine
State or Province of Mailing Address:: CA
Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 92714

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Unknown
Given Name:: Robert
Middle Name:: P.
Family Name:: Cooper
City of Residence:: Yorba Linda
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 19332 Via De La Cielo
City of Mailing Address:: Yorba Linda
State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 92686

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Unknown
Given Name:: Richard
Middle Name:: L.
Family Name:: Quick
City of Residence:: Trabuco Canyon
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 32181 Fall River Road
City of Mailing Address:: Trabuco Canyon
State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 92679

Correspondence Information

Correspondence Customer Number:: 021323

Representative Information

Representative Customer Number:: 021323

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation of	09/860,344	05/18/01
09/860,344	Continuation of	09/409,332	09/30/99
09/409,332	Continuation of	09/058,530	04/10/98
09/058,530	Continuation in part of	09/002,875	01/05/98
09/002,875	Continuation of	08/554,743	11/07/95
08/554,743	Continuation in part of	08/311,967	09/26/94
08/311,967	Continuation in part of	08/205,042	03/02/94
08/205,042	Continuation in part of	08/057,669	05/04/93
08/057,669	Continuation in part of	07/941,382	09/04/92

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
		MM/DD/YY	

Assignee Information

Assignee Name:: Scimed Life Systems, Inc.

City of Mailing Address:: Maple Grove

State or Province of Mailing Address:: Minneapolis

Country of Mailing Address:: US